

COMBINED DECLARATION AND POWER OF ATTORNEY  
(Original, Design, Supplemental, Divisional, Continuation, CIP)

As the below named inventor, I hereby declare that:

INVENTORSHIP IDENTIFICATION

My residence, post office address and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

TITLE OF INVENTION

**VACCINES CONTAINING VIRUSES INVOLVED IN AVIAN MALABSORPTION  
SYNDROME AND METHODS OF ADMINISTRATION THEREFOR**

SPECIFICATION IDENTIFICATION

the specification of which: (complete (a), (b), or (c))

- (a) ☐ is attached hereto.  
(b) ☒ was filed on **March 9, 2005** as  
    ☒ Application Number **10/527,246**  
    ☐ Express Mail No. \_\_\_\_\_, as Application Number not yet known  
(c) ☒ was described and claimed in PCT International Application No.  
    **PCT/US2003/028519** filed on **September 11, 2003** and as amended under  
    PCT Article 19 on \_\_\_\_\_ (if any).

ACKNOWLEDGEMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37 CFR 1.56(a).

**PRIORITY CLAIM**

I hereby claim foreign priority benefits under Title 35, United States Code, Section 119 of any foreign application(s) for patent or inventor's certificate or of any PCT International application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate of any PCT International application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) on which priority is claimed.

- (d) ☒ No such applications have been filed.  
(e) ☐ Such applications have been filed as follows.

NOTE: Where item (c) is entered above and the International Application which designated the U.S. claimed priority, check item (e), enter the details below and make the priority claim.

Earliest Foreign Application(s), if any, filed within 12 months (6 months for Design) prior to this U.S. Application

Country	Application No.	Date of Filing (Day, Month, Year)	Priority Claimed 35 USC 119

All Foreign Application(s), if any, Filed More Than 12 Months  
(6 Months for Design) Prior to This U.S. Application)

CLAIM FOR BENEFIT OF PRIOR U.S. PROVISIONAL APPLICATION(S)  
(35 U.S.C. § 119(E))

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below:

**PROVISIONAL APPLICATION NUMBER**

**FILING DATE**

60/411,064

09/16/2002

CLAIM FOR BENEFIT OF EARLIER U.S./PCT APPLICATION(S)  
(UNDER 35 U.S.C. 120)

I hereby claim the benefit under Title 35, United States Code, Section 120 of any United States application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, Section 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, Section 1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT International filing date of this application.

**PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS  
DESIGNATING THE U.S. FOR BENEFIT UNDER 35 USC 120**

U.S. Applications		Status (Check One)		
U.S. Applications	U.S. Filing Date	Patented	Pending	Abandoned
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PCT Applications Designating U.S.		
PCT APPLICATION NO.	PCT FILING DATE (Day, Month, Year)	U.S. APPLICATION NO. ASSIGNED (if any)
PCT/US2003/28519	11 September 2003	10/527,246

POWER OF ATTORNEY

As a named inventor, I hereby appoint the attorneys and agents associated with the Customer Number below, to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

☒ Customer Number: 25291

As a named inventor, I hereby authorize the attorneys and agents named herein or associated with the above Customer Number to accept and follow instructions from Wyeth as to any action taken in the United States Patent and Trademark Office regarding this application without direct communication between myself and the above appointed attorneys and agent. In the event that I desire to change the attorneys and agents from whom instructions may be taken, the above appointed attorneys and agents will be so notified by me prior to making the change.

☐ Attached as part of this declaration and power of attorney is the authorization of the above-named attorneys and agents to accept and follow instructions from my representative(s).

SEND CORRESPONDENCE TO:

Customer Number: 25291

DIRECT ALL TELEPHONE CALLS TO:

Name: **John F. Levis**  
Tel. No. **973.660.7660**

DECLARATION

I hereby declare that all statements herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements are made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE(S)

Full name of SOLE OR FIRST INVENTOR: **Mathieu Hubert VERTOMMEN**

Inventor's Signature \_\_\_\_\_ Date \_\_\_\_\_

Country of Citizenship: **The Netherlands**

Residence : **Zeelandia 4, 3901 GZ Veenendaal, The Netherlands**

Post Office Address: **Zeelandia 4, 3901 GZ Veenendaal, The Netherlands**

Full name of SECOND JOINT INVENTOR: **Frans Gerrit DAVELAAR**

Inventor's Signature \_\_\_\_\_ Date \_\_\_\_\_

Country of Citizenship: **The Netherlands**

Residence : **Harderwijkerstraat 85, 3881 EG Putten, The Netherlands**

Post Office Address: **Harderwijkerstraat 85, 3881 EG Putten, The Netherlands**

Full name of THIRD JOINT INVENTOR: **Jacob Jacobus LOUWERENS**

Inventor's Signature \_\_\_\_\_ Date \_\_\_\_\_

Country of Citizenship: **The Netherlands**

Residence : **Land in Zicht 4, 1316 VK Almere, The Netherlands**

Post Office Address: **Land in Zicht 4, 1316 VK Almere, The Netherlands**

Assignment of Invention

In consideration of the payment by ASSIGNEE to ASSIGNOR of good and valuable consideration, the receipt of which is hereby acknowledged,  
ASSIGNOR:

- (1) Full Name of Inventor: **Mathieu Hubert VERTOMMEN**  
Residence: **Zeelandia 4, 3901 GZ Veenendaal, The Netherlands**  
Citizenship: **The Netherlands**
- 
- (2) Full Name of Inventor: **Frans Gerrit DAVELAAR**  
Residence: **Harderwijkerstraat 85, 3881 EG Putten, The Netherlands**  
Citizenship: **The Netherlands**
- 
- (3) Full Name of Inventor: **Jacob Jacobus LOUWERENS**  
Residence: **Land in Zicht 4, 1316 VK Almere, The Netherlands**  
Citizenship: **The Netherlands**
- 
- (4) Full Name of Inventor:  
Residence:  
Citizenship:
- 
- (5) Full Name of Inventor:  
Residence:  
Citizenship:
- 
- (6) Full Name of Inventor:  
Residence:  
Citizenship:
- 

hereby sells, assigns and transfers to ASSIGNEE:

Wyeth  
Five Giralda Farms  
Madison, New Jersey 07940

and the successors, assigns and legal representatives of the ASSIGNEE the entire right, title and interest for the United States and its territorial possessions and in all foreign countries, including all rights to claim priority, in and to the invention entitled:  
**VACCINES CONTAINING VIRUSES INVOLVED IN AVIAN MALABSORPTION SYNDROME AND METHODS OF ADMINISTRATION THEREFOR**

and invented by ASSIGNOR and the following additional inventors, if any:

and which is found in U.S. Application No. **10/527,246** filed on: **March 9, 2005**

☐ I/we the ASSIGNOR signing below, hereby authorize and request insertion above of the application number and filing date, when they become known,

[also check if foreign application(s) is(are) also being assigned]

☒ and any legal equivalent thereof in a foreign country,

including the right to claim priority, including any and all improvements disclosed therein, and in and to all Letters Patent to be obtained for said invention by the above application or any subsequently filed provisional, nonprovisional, continuation, divisional, renewal, or substitute thereof, and as to Letters Patent any reissue or re-examination thereof.

ASSIGNOR hereby covenants that no assignment, sale, agreement or encumbrance has been or will be made or entered into which would conflict with this assignment.

ASSIGNOR authorizes ASSIGNEE to make applications for and to receive Letters patent for said invention in any of said countries in its own name, or in ASSIGNOR's name, at its election.

ASSIGNOR covenants and agrees to execute or procure any further necessary assurance of the title to said invention and any Letters Patent which may issue therefore and to, at any time, upon the request and at the expense of ASSIGNEE deliver any testimony in any interference, litigation or proceeding related thereto and execute all papers that may be necessary or desirable to perfect the title to said invention or any Letters Patent which may be granted therefore in ASSIGNEE, its successors, assigns or other legal representatives, and that to, at any time, upon the request and at the expense of ASSIGNEE execute any continuation, continuation-in-part, divisional, renewal or substitute thereof, and as to Letters Patent and reissue or re-examination thereof, or any other additional applications of Letters Patent for said invention or any part thereof, all of which applications and any Letters Patent issuing thereon are hereby assigned to ASSIGNEE, and will make all rightful oaths or declarations, and do all lawful acts requisite for procuring the same therein, without further compensation, but at the expense of ASSIGNEE, its successors, assigns or other legal representatives.

ASSIGNOR authorizes and requests the Commissioner of Patents to issue any and all Letters Patent of the United States for said invention, resulting from any of the aforesaid applications to its ASSIGNEE.

\_\_\_\_\_  
**Mathieu Hubert VERTOMMEN**

\_\_\_\_\_  
Date

**ACKNOWLEDGMENT**

State of \_\_\_\_\_ }  
County of \_\_\_\_\_ } ss:

On the \_\_\_\_\_ day of \_\_\_\_\_ 2005, **Mathieu Hubert VERTOMMEN** personally appeared before me, known by me to be the same person described in and who executed the foregoing instrument, and acknowledged that he/she executed the same, of his/her own free will and for the purposes set forth.

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
**Frans Gerrit DAVELAAR**

\_\_\_\_\_  
Date

**ACKNOWLEDGMENT**

State of \_\_\_\_\_ }  
County of \_\_\_\_\_ } ss:

On the \_\_\_\_\_ day of \_\_\_\_\_ 2005, **Frans Gerrit DAVELAAR** personally appeared before me, known by me to be the same person described in and who executed the foregoing instrument, and acknowledged that he/she executed the same, of his/her own free will and for the purposes set forth.

\_\_\_\_\_  
Notary Public



\_\_\_\_\_  
**Jacob Jacobus LOUWERENS**

\_\_\_\_\_  
Date

**ACKNOWLEDGMENT**

State of \_\_\_\_\_ }  
County of \_\_\_\_\_ } ss:

On the \_\_\_\_\_ day of \_\_\_\_\_, 2005, **Jacob Jacobus LOUWERENS** personally appeared before me, known by me to be the same person described in and who executed the foregoing instrument, and acknowledged that he/she executed the same, of his/her own free will and for the purposes set forth.

\_\_\_\_\_  
Notary Public